# P15000099420

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TALLAHASSEE, FLORIDE

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#### **COVER LETTER**

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Division of Corporat	ions			
NAME OF CORPORAT	ПОN: <u> </u>	FLORIDA	DIESEL	SPECIALIST. ZNC
DOCUMENT NUMBER	R: <u>P15000</u>	099420		<u>.</u>
The enclosed Articles of	Amendment and fee are su	bmitted for filing.		
	ndence concerning this ma			
_	NIRVANDO TAX CO	BA Ti STA  Name of Contact Per	SOII	
<u></u>	TAX (O	N TROLLER	c Zuc	<del></del>
		Firm/ Company		
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<u> </u>	OMPANO	BEACA FL	33064	1
		City/ State and Zip C	ode	
	R @ TAX ( E-mail address: (to be us	CONTROLL (v	ort notification)	
For further information co	oncerning this matter, pleas	e call:		
Nin Name of C	BATISTA Contact Person	at ( 951	30/	18 48
Name of C	omact i cison	Alca	Code & Daytine 1	eteptione raumoer
Enclosed is a check for th	e following amount made	payable to the Florida D	epartment of State:	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of	of Status opy

#### **Mailing Address**

TO: Amendment Section

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

#### **Street Address**

Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

is enclosed)

## Articles of Amendment to Articles of Incorporation of the lines of the

SOUTH FLORIDA DIESEL SPECIALIS	ST INC	*C MAD _7 PM L:	li K	
(Name	of Corporation as currently	filed with the Florida Dep	t. of State)	
P15000099420	•	SECRETARY OF STA	TE RINA	
	(Document Number of C	Corporation (if known)	in or i	
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this FI	orida Profit Corporation a	dopts the following amer	ndment(s) to
A. If amending name, enter the new na	ame of the corporation:			
			The	new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co	o". A professional corpor		
B. Enter new principal office address, (Principal office address MUST BE A S	<u>if applicable:</u> TREET ADDRESS )			
				_
C. Enter new mailing address, if applications (Mailing address MAY BE A POST)				<del></del>
D. If amending the registered agent an		s in Florida, enter the na	me of the	
new registered agent and/or the new				
Name of New Registered Agent	TAX CONTROLLER INC			
	750 E SAMPLE RD BLDG	3 BAY 5		
	(Florida street	t address)		
New Registered Office Address:	POMPANO BEACH		_, Florida	
	(C	Tity)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent: tered agent. I am familiar wit	h and accept the obligation	ns of the position.	
	Signature of New Reg	istered Agent if changing		

### If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	,
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	VP	DANIEL DE MELLO	127 S LAUREL DR UNIT 508
Add			MARGATE FL 33063
Remove			
2) Change	P	CLAUDIR VISENTIN	43 S POWERLINE RD UNIT 408
X Add			POMPANO BEACH FL 33069
Remove			
3) Change			
Add			
Remove			
4) Change	<del></del>		
Add			
Remove			
5)Change			
Add			
Remove			<del> </del>
6) Change			
Add			
Damaya			

,	cles, enter change(s) here: (Be specific)
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provisions for implementing the ame	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
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provisions for implementing the ame	ange, reclassification, or cancellation of issued shares, and and and an and an

	03/01/2016	
The date of each amendment(s) a date this document was signed.	doption:	, if other than th
Effective date if applicable:		
<u></u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, the partment of State's records.	his date will not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ad by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendatificient for approval.	nent(s)
	proved by the shareholders through voting groups. The following sure each voting group entitled to vote separately on the amendment(s)	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and share	cholder
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and sharehold	ler
03/01/201	5	
Dated		
Signature		
(By a c	director, president or other officer – if directors or officers have not ed, by an incorporator – if in the hands of a receiver, trustee, or othe need fiduciary by that fiduciary)	
арроп	CLAUDIR VISENTIN	
	(Typed or printed name of person signing)	<u> </u>
	PRESIDENT	
	(Title of person signing)	